

County of San Diego DEPARTMENT OF ENVIRONMENTAL HEALTH

Land and Water Quality Division
5201 Ruffin Road, Suite C
San Diego, CA 92123
(858) 565-5173 (800) 253-9933 FAX (858) 694-3105

Recycled Water Plan Check Application Form

Date: Water Purve	eyor: KIVA Peri	mit No. LREC
☐ New Construction	Retrofit Construction	
Project Name:		
Assessors Parcel Number:		
Project Address:		
City:	Zip Code:	
Engineer/Architect:	License Nu	ımber:
Mailing Address:		
Phone Number:	Fax Number:	
Owner:		
Owner Address:		
Additional Plan Check Bill to:		
plans for the first three hours	mum fee of \$357.00 will be required when sof plan review. Payment shall be by ca it card. Recycled water plans that require 119.00 per hour.	ish, check payable to the
KIVA Fee Code	<u>PROJECT</u>	<u>FEE</u>
6LD12EHO	Recycled Water Plan Check (3 Hours of Review Time)	\$ <u>357.00</u> _
6LD12EHO	Additional Plan Check (Hourly Rate X Number of Hours)	\$